24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Progressive Change Campaign Committee Fec Identification Number	Schedule E) FOR SE OF FORM 24/48	
Progressive Change Campaign Committee C	NAME OF COMMITTEE (In Full)	
Full Name of Payee Mailing Address City State Zip Code Transaction ID: D515258 Date of Disbursement of Obligation Transaction ID: D515258 Date of D51	Progressive Change Campaign Committee	
Full Name of Pave		C C00458000
Mailing Address 156 University Ave	Check if 24-hour report 48-hour report New report A	
Mailing Address 156 University Ave City State Zip Code Part Advertising Category Type Office Sought: House District: 00 Trump, Donald, X Oppose X President Senate State: DC Disbursement or Obligation Office Sought Date of Disbursement or Obligation Office Sought Date of Disbursement or Obligation Office Sought Disbursement Disbursem	Full Name of Payee	Date of Public Distribution/Dissemination
City State Zip Code Palo Alto CA 94301-1688 Purpose of Expenditure Advertising Name of Federal Candidate Trump, Donald, ,	Facebook	M M / D D / Y Y Y Y
Palo Alto CA 94301-1688 Transaction ID: D515258 Date of Disbursement or Obligation Purposa of Expenditure Advertising Name of Federal Candidate Trump, Donald, , ,	Mailing Address 156 University Ave	Amount
Palo Alto CA 94301-1688 Transaction ID: D515258 Date of Disbursement or Obligation Purposa of Expenditure Advertising Name of Federal Candidate Trump, Donald, , ,	City State Zin Code	1017.40
Purpose of Expenditure Advertising Name of Federal Candidate Trump, Donald,		88 Transaction ID : D515258
Trump, Donald,	Advertising	// DD / YTYTY
Calendar Year-To-Date Per Election for Office Sought Full Name of Payee Page Disbursement For: Primary General 2016 Other (specify) Date of Public Distribution/Dissemination Mailing Address Amount	Name of Federal Candidate	Support Office Sought: House District: 00
Per Election for Office Sought Pull Name of Payee	Trump, Donald, , ,	Oppose President Senate State: DC
Full Name of Payee Date of Public Distribution/Dissemination Mailing Address		19 2016
Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Other (specify) Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Cother (specify) (a) SUBTOTAL of Unitemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures Long President Senate State: Primary General Other (specify) Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Green, Adam (Electronically Filed) Date 10 18 2016	Full Name of Payee	· · · · · · · · · · · · · · · · · · ·
City State Zip Code Purpose of Expenditure Date of Disbursement or Obligation		M M / D D / Y Y Y Y
City State Zip Code Date of Disbursement or Obligation	Mailing Address	
Purpose of Expenditure Category/ Type		Amount
Purpose of Expenditure Category/ Type	City State Zip Code	
Purpose of Expenditure Category/ Type		Date of Disbursement or Obligation
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures	Category	// M M / D D / Y Y Y Y
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate	Support Office Sought: House District:
Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures		Oppose President Senate State:
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures	- 5. Eloculor is office occupin	Other (specify) -
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. [Electronically Filed] Date 10 18 2016	(a) SUBTOTAL of Itemized Independent Expenditures	1017.49
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. [Electronically Filed] Date Date To Property Pro	(b) SUBTOTAL of Unitemized Independent Expenditures	
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. [Electronically Filed] Date M M M Date 18 2016	(c) TOTAL Independent Expenditures	
[Electronically Filed] Date 10 18 2016	with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political	
	[Electronically Filed] Date 10 18 2016	